ARIZONA DEPARTMENT OF LIQUOR LICENSES & CONTROL

800 W Washington 5th Floor Phoenix AZ 85007-2934 (602) 542-5141 400 W Congress #521 Tucson AZ 85701-1352 (520) 628-6595

APPLICATION FOR SPECIAL EVENT LICENSE

Fee = \$25.00 per day for 1-10 day events only
A service fee of \$25.00 will be charged for all dishonored checks (A.R.S.§ 44-6852)

NOTE: THIS DOCUMENT MUST BE FULLY COMPLETED OR IT WILL BE RETURNED.

PLEASE ALLOW 10 BUSINESS DAYS FOR PROCESSING.
**Application must be approved by local government before submission to Department of Liquor Licenses and Control. (Section #20) LICENSE #
1. Name of Organization: NORTHERN FRIZONA INTERFAME Council
2. Non-Profit/I.R.S. Tax Exempt Number: 86/6/6733
3. The organization is a: (check one box only)
☐ Charitable ☐ Fraternal (must have regular membership and in existence for over 5 years)
☑ Civic ☐ Political Party, Ballot Measure, or Campaign Committee
⊠ Religious
4. What is the purpose of this event? FUND RAISER
5. Location of the event: ST ANDREWS Church Sedera Yavapar 86336 Address of physical location (Not P.O. Box) City County Zip
Applicant must be a member of the qualifying organization and authorized by an Officer, Director or Chairperson of the Organization named in Question #1. (Signature required in section #18)
6. Applicant: RACHEL LINDA LAND 10953 Last First Middle Date of Birth
7. Applicant's Mailing Address: 3190 W Aux K9A Sectors A K10336 Street City State Zip 8. Phone Numbers: (926) 282-4457 Site Owner # Applicant's Business # Applicant's Home #
Site Owner # Applicant's Business # Applicant's Home # 9. Date(s) & Hours of Event: (Remember: you <u>cannot</u> sell alcohol before 10:00 a.m. on Sunday)
Date Day of Week Hours from A.M./P.M. To A.M./P.M.
Day 1: 5/23/2010 SUNDAY 3:30 PN 7:30 PW
Day 2:
Day 3:
Day 4:
Day 5:
Day 6:
Day 7:
Day 8:
Day 9:
Day 10: Lic 0106 05 2006 *Disabled individuals requiring special accommodations, please call (602) 542-9027

). Has the applicant been convicted of a felony in the past five years, or had a liquor license revoked? ☐ YES ☑ NO (attach explanation if yes)					
11. This organization has been issued a special event license for days this year, inclu (not to exceed 10 c					
12. Is the organization using the services of a promoter or other person to manage the event? If yes, attach a copy of the agreement.	YES THIO				
13. List all people and organizations who will receive the proceeds. Account for 100% of the THE ORGANIZATION APPLYING MUST RECEIVE 25% OF THE GROSS REVENUES EVENT.	OF THE SPECIAL				
Name Northern Arizona Intertaigh Colone	Percentage				
Name Northern Arizona Interfaigh Colline Address 2675 West Highway 89 A #1104, Sedona, Az	, 86336				
Name	Percentage				
Address——————————————————————————————————					
14. Knowledge of Arizona State Liquor Laws Title 4 is important to prevent liquor law violation any questions regarding the law or this application, please contact the Arizona State Dep Licenses and Control for assistance.	ns. If you have partment of Liquor				
NOTE: ALL ALCOHOLIC BEVERAGE SALES MUST BE FOR CONSUMPTION AT THE EVE "NO ALCOHOLIC BEVERAGES SHALL LEAVE SPECIAL EVENT PREM	ENT SITE ONLY. ISES."				
15. What security and control measures will you take to prevent violations of state liquor laws (List type and number of security/police personnel and type of fencing or control barriers it	at this event? f applicable)				
# Police					
# Security personnel					
Church trents - Hoults Only					
16. Is there an existing liquor license at the location where the special event is being held?	☐ YES ☑ NO				
If yes, does the existing business agree to suspend their liquor license during the time period, and in the area in which the special event license will be in use? (ATTACH COPY OF AGREEMENT)	☐YES ☐NO				
•)				
Name of Business	Phone Number				
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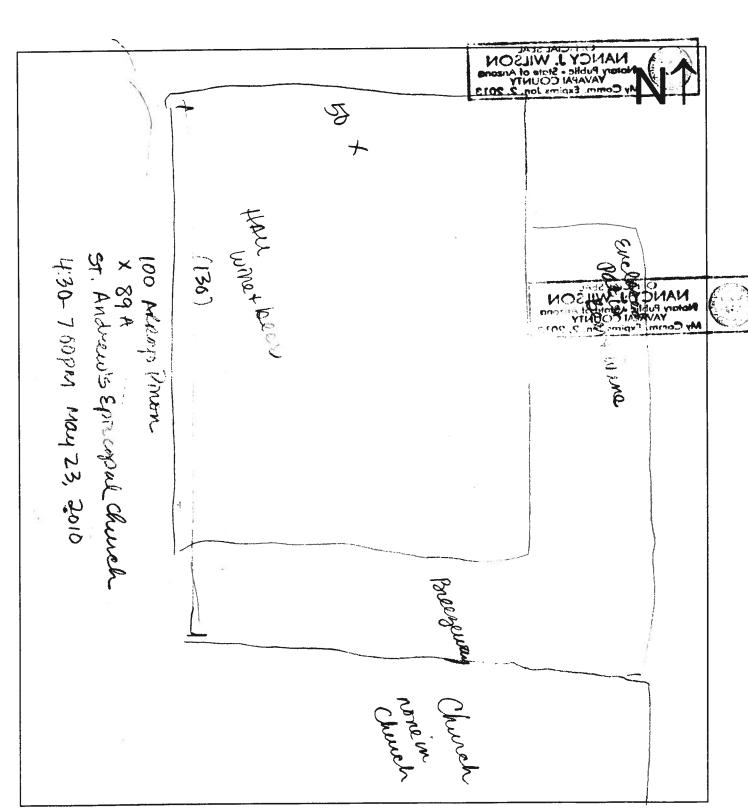
17. Your licensed premises is that area in which you are authorized to sell, dispense, or serve spirituous liquors under the provisions of your license. The following page is to be used to prepare a diagram of your special event licensed premises. Please show dimensions, serving areas, fencing, barricades or other control measures and security positions.

	THIS SECTION TO BE COMPLETED ONLY BY AN OFFICER, DIRECTOR OR CHAIRPERSON OF THE ORGANIZATION NAMED IN QUESTION #1						
	$1 \cdot M \cup \frac{DR}{C}$	GANIZATION NAMED	IN QUESTION #1				
	18. I. LINDA I ARTI	NeZ dec	are that I am an Officer/D	irector/Chairperso	n appointing the		
	(Print full name) applicant listed in Question 6, to apply on	behalf of the foregoing orga	nization for a Special Even	nt Liquor License.			
		en Op-Chai			2729-117	.,	
	(Signature	(Title/Po		Date)	(Phone #)	T	
	OFFICIAL SEAL STATE		Arizona co	ounty of <u>Yava</u>	rpai		
	NANCY J. WILSON Notary Public - Stote of Artsone	The fore	egoing instrument was a	acknowledged be	fore me this		
	My Comm. Expires Jan. 2, 2013		5th	May Month	2010 Year		
	My Commission expires on:	January 2,2013	The	my a Wi	luon)		
		(Date)	(Signatu	re of NOVARY PU	BLIC)		
	THIS SECTION TO BE COMP	ETED ONLY BY TI	IE APPLICANT NA	MED IN OUE	STION #6	=	
·	19. Linka Rachel						
	(Print full name)		re that I am the APPLIC		•		
	listed in Question 6. I have read the a	oplication and the conten	ts and all statements are	e true, correct an	d complete.		
	den Carpa	\mathbb{A} State of \mathbb{A}	cizona co	ounty of Yava	pai		
	(Sibnatura)	The for	regoing instrument was act	_			
1	NANCY J. WILSON		5th Ma Day Monti		2010 Year		
	Motory Public - State of Artzona YAVAPAI COUNTY My Commussion expires 901 3 Januar	1 2,2013	Mancy (1 W)	(lam)	i dai		
	(Date)		(Signature of NOT	ARY PUBLIC)			
	You must obtain local government a	pproval. City or Cour	nty MUST recommend	d event and co	molete item #2	^	
	You must obtain local government approval. City or County MUST recommend event and complete item #20. The local governing body may require additional applications to be completed and submitted 60 days in advance of the event. Additional licensing fees may also be required before approval may be granted.						
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	LOCAL G	OVERNING BODY A	PPROVAL SECTION	ON		_	
ı	20. 1.		boroby recomme				
	(Government Official)	(Title)	hereby recomme	nd this special ev	ent application		
	on behalf of			*	.		
L	(City, Town or County)	···	(Signature of OFFICIAL)		(Date)		
	FO	R DLLC DEPARTME	NT USE ONLY				
	Department Comment Section:						
							
	(Employee)			(Date)			
=	CLADDON/FD CLADDON/FD						
	☐ APPROVED ☐ DISAPPROVED	BY:	-	- -		•	
							
			(Title)	(Date)		

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SPECIAL EVENT LICENSED PREMISES DIAGRAM (This diagram must be completed with this application)

Special Event Diagram: (Show dimensions, serving areas, and label type of enclosure and security positions) NOTE: Show nearest cross streets, highway, or road if location doesn't have an address.





HOLD HARMLESS AGREEMENT

The Applicant, having applied for a Special Event Liquor License Permit, agrees that it will hold the City, their assignees, agents, officers and employees harmless from and against (and herein waives as against such parties) any and all claims, actions, suits, costs, expenses, damages and liabilities or whatsoever kind of nature (including legal fees and expenses) incurred by the Applicant or any parties associated therewith, within or without the City limits and resulting from the negligent serving of spirituous liquor by the Applicant, his agents or his employees. Applicant assumes any and all risks and liabilities (including those for third party damages and claims) with regard to the Special Event Liquor License Permit.

Name(s):	RACHE (
Address: 3190 W.	Wighway	89Ave 7	# 8W	— &03≥4
Signatures	Rach			
(Applicant) Date: 5/5/				
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